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June 23, 2004

Date

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|--|------------------------------|---|---|--|--|--|--|--|
| RAMSMITTAL FORM | | Application No. | 10/003,147 | | | | | |
| | | Filing Date | November 14, 2001 | | | | | |
| (to be used for all correspondence after initial filing) | | First Named Inventor | Bradford H. Needham | | | | | |
| | | Art Unit | 2876 | | | | | |
| | | Examiner Name | Lisa M. Caputo | | | | | |
| Total Number of Pages in This Submissi | on | Attorney Docket Number | 42390P12438 | | | | | |
| ENCLOSURES (check all that apply) | | | | | | | | |
| Fee Transmittal Form | Drawing(s) | | After Allowance Communication to Group | | | | | |
| Fee Attached | Licensing-r | elated Papers | Appeal Communication to Board of Appeals and Interferences | | | | | |
| Amendment / Response | Petition | | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) | | | | | |
| After Final Affidavits/declaration(s) | Petition to (Provisional | Convert a Application | Proprietary Information | | | | | |
| Extension of Time Request | Power of A Change of | ttorney, Revocation Correspondence Address | Status Letter | | | | | |
| Express Abandonment Request | Terminal D | isdaimer | Other Enclosure(s) (please identify below): | | | | | |
| Information Disclosure Statement | Request for | Refund | - Check for \$688.00 - Check for \$110.00 | | | | | |
| PTO/SB/08 | CD, Numbe | er of CD(s) | - Return Receipt Postcard | | | | | |
| Certified Copy of Priority Document(s) | | | | | | | | |
| Response to Missing Parts/ Incomplete Application | Remarks | | | | | | | |
| Basic Filing Fee | | _ | · | | | | | |
| Declaration/POA | | | | | | | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | | | |
| | E OF APPLICAN | IT, ATTORNEY, OR AG | ENT | | | | | |
| Firm Paul A. Mendor | nsa. Reg. No. 4 | 12.879 | | | | | | |
| or | | ΥΥΊΕΙ ΤΑΥΙΟΝ & ZAFM | AN LLP | | | | | |
| Signature The W | mdons | | | | | | | |
| Date June 23, 2004 | | | | | | | | |
| CERTIFICATE OF MAILING/TRANSMISSION | | | | | | | | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | | | | | | |

Typed or printed name

Signature

Deborah L. Higham



FEE TRANSM for FY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

798.00

(\$)

Complete if Known Application Number 10/003,147 November 14, 2001 Filing Date First Named Inventor Bradford H. Needham Examiner Name Lisa M. Caputo 2876 Art Unit 42390P12438 Attorney Docket No.

Date

| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | ed) | | | | |
|--|-----------------------------------|-----------------------------|--------------|-----------|---|----------------------|-------------------|----------|--|
| Manage Charles Conditioned Money Other None | 3. ADDITIONAL FEES | | | | | | | | |
| Order Order | Large | e Entity | ı Sma | II Entity | , | | | | |
| Deposit Account | Fee | Fee | Fee | Fee | <u>-</u> | | | | |
| Deposit Account 02-2666 | Code | (\$) | Code | (\$) | Fee | Description | | Fee Paid | |
| Number U2-2000 | 1051 | 130 | 2051 | 65 | Surcharge - late filing | | | | |
| Deposit | 1052 | 50 | 2052 | 25 | Surcharge - late provi cover sheet. | sional filing fee or | | | |
| Account Name Blakely, Sokoloff, Taylor & Zafman LLP | 2053 | 130 | 2053 | 130 | Non-English specifica | tion | | | |
| The Commissioner is authorized to: (check all that apply) | 1812 | 2,520 | 1812 | 2,520 | For filing a request for ex parte reexamination | | | | |
| Charge fee(s) indicated below Credit any overpayments | 1804 | 920* | 1804 | 920 | * Requesting publication of SIR prior to Examiner action | | | | |
| Charge any additional fee(s) or underpayment of fees as required under 37 | 1805 | 1,840 * | | | | | | | |
| CFR §§ 1.16, 1.17, 1.18 and 1.20. Charge fee(s) indicated below, except for the filling fee | '**- | ••• | | | Examiner action | | | | |
| to the above-identified deposit account | | 110 | 2251 | 55 | | | | 110.00 | |
| FEE CALCULATION | 1252 | 420 | 2252 | 210 | Extension for reply wit | | | | |
| 1. BASIC FILING FEE | 1253 | 950 | 2253 | 475 | Extension for reply wit | | | | |
| Large Entity Small Entity | 1254 | 1,480 | 2254 | 740 | Extension for reply wit | | | | |
| Fee Fee Fee Fee Fee Peach Fee Paid Code (5) Code (5) | 1255 | 2,010 | 2255 | 1,005 | Extension for reply wit | hin fifth month | | | |
| 1001 770 2001 385 Utility filing fee | 1404 | 330 | 2401 | 165 | Notice of Appeal | | | | |
| 1002 340 2002 170 Design filing fee | 1402 | 330 | 2402 | 165 | Filing a brief in suppor | | | | |
| 1003 530 2003 265 Plant filing fee | 1403 | 290 | 2403 | 145 | Request for oral hear | <u> </u> | | | |
| 1004 770 2004 385 Reissue filing fee | 1451 | 1,510 | 2451 | 1,510 | Petition to institute a public use proceeding | | | | |
| 1005 160 2005 80 Provisional filing fee | 1452 | 110 | 2452 | 55 | Petition to revive - una | | | | |
| SUBTOTAL (1) (\$) | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | | | | |
| | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | | | | |
| 2. EXTRA CLAIM FEES Extra Fee from | 1502 | 480 | 2502 | 240 | Design issue fee | | | | |
| Claims below Fee Paid Total Claims 43 50° - 0 x 18.00 = \$0.00 | 1503 | 640 | 2503 | 320 | Plant issue fee Petitions to the Comn | rionianas | | | |
| Independent 43 - 50 = 0 X 16.00 = \$0.00 | 1460 1807 | 130 50 | 2460 1807 | 130 50 | Prosessing fee under | | | | |
| Claims | 1806 | 180 | 1806 | 180 | Submission of Informa | | imi | | |
| Large Entity Small Entity | 8021 | 40 | 8021 | 40 | Recording each pater | | | | |
| Fee Fee Fee Fee Description | | ,,, | 002. | | property (times number | | | | |
| Code (5) Code (5) | 1809 | 770 | 1809 | 385 | Filing a submission af | ter final rejection | | | |
| 1202 18 2202 9 Claims in excess of 20 | | 770 | | 205 | (37 CFR § 1.129(a)) | | | | |
| 1201 86 2201 43 Independent claims in excess of 3 | 1810 | 770 | 2810 | 385 | For each additional investment (37 CFR § | | | | |
| 1203 290 2203 145 Multiple Dependent claim, if not paid | 1801 | 770 | 2801 | 385 | Request for Continued | d Examination (RCI | E) | | |
| 1204 86 2204 43 **Reissue independent claims over original patent | 1802 | 900 | 1802 | 900 | Request for expedited | | | | |
| 1205 18 2205 9 **Reissue claims in excess of 20 and over | | | | | of a design application | 1 | | | |
| original patent | Other fe | e (specify) | | | | | | | |
| SUBTOTAL (2) (\$) 688.00 | * Reduced | l by Basic Filin | n Fee Pa | d | | SUBTOTAL (3) | (\$) | 440.00 | |
| **or number previously paid, if greater, For Reissues, see below | | | g | | | 3001017.2 (-) | | 110.00 | |
| SUBMITTED BY | | | | | | Comp | olete (if applica | ible) | |
| Name (Print/Type) Paul A. Mendonsa | Registration No. (Attorney/Agent) | | | 4 | 12,879 Telephone (503) 684-620 | | | 4-6200 | |
| Signature | | | | | Date | 06/23 | 3/04 | | |

Signature

HE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.:

10/003,147

Confirmation No.: 7425

Applicant:

Bradford Needham

042390.P12438

Filed:

November 14, 2001

Customer No.:

Docket No.:

008791

TC/A.U.:

2876

Examiner:

Caputo, Lisa M.

Title:

ASSOCIATING EVENT RECORDINGS WITH EVENT PARTICIPANTS

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

RESPONSE

In response to the Office Action mailed February 23, 2004, please enter this amendment and consider the following remarks. This response is organized as follows:

Amendments to the Claims begin on page 2.

Remarks begin on page 16.

05/30/2004 CCHAU1 00000038 10003147

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